



Date _____

Volunteer Member Application

Last	First	Mi	ddle Initial	Date of Birth
Address:				
Street - Apt. #		City	State	Zip Code
Phone - Home:	Cellp	hone:		
E-mail:				
Driver's License: #: Is this license currently valid: PLEASE ATTACH A COP' THIS APPLICATION	Yes No			
Race/Ethnicity:American Native H	IndianAsianAfrican A lawaiian or other Pacific Islar		niteHispanic/L	atinoMultiracial
Are you a United States citizen of If you are a lawful permanent				37, what is your registra
number and card expiration date				
	e?			
number and card expiration date	e?			
number and card expiration date Persons to notify in case of	e?if emergency:	Phone:		
number and card expiration date Persons to notify in case of the	e?I f emergency:I grade completed	Phone:		
Persons to notify in case of Name: Name: EDUCATION: Circle highest	e?I If emergency:I If grade completed If 6 7 8 HIGH SCHOOL	Phone: Phone: 9 10 11 12	2 COLLEGE 1	
Persons to notify in case of Name: Name: EDUCATION: Circle highest GRADE SCHOOL 1 2 3 4 5	e?I If emergency:I If grade completed If 6 7 8 HIGH SCHOOL	Phone: Phone: 9 10 11 12	2 COLLEGE 1	2 3 4 5 6
Persons to notify in case of Name: Name: EDUCATION: Circle highest GRADE SCHOOL 1 2 3 4 5	f emergency: I grade completed 6 6 7 8 HIGH SCHOOL	Phone: Phone: 9 10 11 12	2 COLLEGE 1	2 3 4 5 6



Experience: Include all related job and volunteer experience in order of most recent experience.

Pho State	Zip Code Zip Code Zip Code
Pho State	Zip Code
Pho State	Zip Code
State Pho	Zip Code
Pho	
	Zip Code
mplete a crimi	inal background che
olic website, fin	gerprinting clearance
nd all information and individuals	te. In addition, I auth on concerning statem connected therewith
b u ar	blic website, find. ue and compleound all information



Availability

Date you are available to begin:					
What days and times are you available? (Please include morning and afternoon hours)					
Monday	Tuesday	Wednesday			
Thursday	Frida	у			
•	a specific school site? Yes e you would prefer (These times	No are approximate and may be subject to change)			
Thew					
2130 E Howe Ave Tempe, AZ 85	5281 Tutoring Hours: 9:15 – 11:	15am			
Aguilar					
5800 S Forest Ave Tempe, AZ 85283 Tutoring Hours: 9:05-11:05am					
Holdeman					
1326 W. 18 th St. Tempe, Az. 852	82 Tutoring Hours։ 1:30 to 3:30ր	om			
Scales					
1115 W. 5 th St. Tempe, AZ 8528	1 Tutoring Hours: 9:30 –11:30am	1			
Arredondo					
1330 E. Carson Dr. Tempe, AZ	85282 Tutoring Hours: Mon/We	ed 9:30-11:30am Tues/Thurs 1:30-3:30pm			
Fuller					
1975 E. Cornell Dr. Tempe, AZ	85283 Tutoring Hours: 8:40-10	:40am			
Frank					
8409 S. Avenida del Yaqui Gua	dalupe, AZ 85283 Tutoring Hou	rs: 9:40-11:40am			
Hudson					
1325 E. Malibu Dr. Tempe, AZ 8	5282 Tutoring Hours: 8:35-10:3	35am			
Curry					
1974 E. Meadow Dr. Tempe, A	Z 85282 Tutoring Hours: 1:30-	3:30pm			



References (Personal or Professional)

(Need minimum of two)

I hereby authorize the City of Tempe to check my referen	ces with the following individual.
Name/Title:	
Address/City/Zip:	
Date(s) Employed or Volunteered:	
Phone #: ()	
I hereby authorize the City of Tempe to check my referen reference.)	ces with the following individual (Complete box for each
Name/Title:	
Address/City/Zip:	
Date(s) Employed or Volunteered:	
Applicant Signature	Date



VOLUNTEER APPLICATION

PLEASE COMPLETE

NOTE: FORM MUST BE SIGNED BEFORE A NOTARY PUBLIC

Na	Name:	Telephone #:				
Ac	Address:					
Ci	City: State	Zip Code:				
		Check box if this statement is true) 1. I am not awaiting trial or have not been convicted of or admitted in open ourt or pursuant to a plea agreement to committing the criminal offenses listed in Question 2 below.				
	□ (Check box if this statement is true) 2. I am away pursuant to a plea agreement to committing the crim	aiting trial or I have been convicted of or admitted in open court or ninal offenses listed below.				
	 B. Incest C. First or second degree murder D. Kidnapping E. Arson F. Sexual assault G. Sexual exploitation of a minor H. Felony offenses involving contributing to the del I. Sexual exploitation of a minor J. Felony offenses involving sale, distribution or trasell, transport or distribute marijuana or dangeror K. Felony offenses involving the possession or use L. Misdemeanor offenses involving the possession M. Burglary in the first degree N. Burglary in the second or third degree O. Aggravated or armed robbery P. Robbery Q. A dangerous crime against children as defined R. Child abuse S. Sexual conduct with a minor T. Molestation of a child U. Voluntary manslaughter V. Aggravated assault W. Assault W. Assault X. Exploitation of minors involving drug offenses 	nsportation of , offer to sell, transport, or distribute or conspiracy to us or narcotic drugs of marijuana, dangerous drugs or narcotic drugs or use of marijuana or dangerous drugs				
(T	Signature (TO BE COMPLETED BY NOTARY PUBLIC)	Date				
	State of)					
Th thi	· ·	rovided proper identification, signed before me his/her name on20				
IVI	wy Commission Expires.	NOTARY PUBLIC				